

Joseph Show Order Form

On Thursday, Oct. 1, at 12:45 p.m., a luxury coach bus will depart from the Kalahari Resort for Sight & Sound's grand 2,000-seat Millennium Theatre in Lancaster County, Pennsylvania. Our group has ideal seating reserved (center section, eye-level with the stage). Tickets are limited and will be distributed on a first-come, first-served basis (based on the **postmark date for the completed order form** below). Attire: Sabbath wear or dressy casual.

Please be prompt. Maps and driving directions will be provided in advance just in case anyone misses the bus due to unforeseen circumstances. Snack packs will be served as you board the bus to tide you over until we arrive for our early dinner (3:30-4:45 p.m.) at the Plain & Fancy Farm. You'll enjoy the Amish Farm Feast: bakery-fresh raisin bread, turkey, fried chicken, roast eye-of-round beef, Pennsylvania Dutch chicken pot pie, mashed potatoes, egg noodles with browned butter, shoepeg corn, apple crumb pie, vanilla ice cream and more! Afterward, we'll board the bus for the show, which begins at 6:30 p.m. We plan to be back at the Kalahari Resort at about 11:30 p.m.

Experience a cast of 45 professional adult and child actors and dozens of live animals on the stage and in the aisles. ... Witness several amazing dream sequences, including Joseph in his colorful coat "flying" above the audience. 20 original songs add to the excitement, helping Sight & Sound live up to its motto: "Where the Bible comes to life!"® (sight-sound.com/WebSite/shows.do?showCD=JOE#m1).

Pocono Mountains: Joseph Show Package Order Form

Form Deadline: Monday, Aug. 24, 2015

Tickets are required for **all ages** (includes show, dinner, bus transportation and snack pack). Please indicate number of paid tickets for each of the applicable age groups below:

____ \$65 per child (aged 3-12) = \$ _____
____ \$100 per teenager and adult = \$ _____
____ **Total number of paid tickets** **Total: \$** _____
____ Free (under age 3)



Make checks payable to "Church of God Queens." Mail completed order form (postmarked by **Aug. 24**) to: COG Queens, P.O. Box 04-0147, Brooklyn, NY 11204-0147. Tickets are **nonrefundable**. Please list handicap/translation needs, if any: _____

Name: _____

Address: _____

City: _____ State/Province _____ ZIP Code _____

Home Phone: _____ Cell Phone: _____ (Feast contact #)

Email: _____ (for updates)

Church Area & Pastor: _____